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FAX TRANSMISSION — Law Department

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15801 Woods Edge Road
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Date: 5/9/03

of Pages: 9
(including cover)☐

Urgent

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Reply ASAP

To: Examiner Elizabeth Cole

Company: USPTO

Fax #: 703-872-9310

Phone #: 703-308-0037

From: Virginia Szigeti

Fax #: 804-520-3568

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(Call if you did not receive all pages, or if document is illegible)

MESSAGE:

GROUP ART UNIT: ~~1771~~
SERIAL NO.: ~~09/981,611~~
FILED: October 16, 2001
ATTORNEY DOCKET NO.: 30-4496CONT

I hereby certify that this correspondence is being sent to the United States Patent & Trademark Office via facsimile to Examiner Elizabeth Cole, Group Art Unit 1771, at 703-872-9310 on May 9, 2003

ENCLOSURES: Amendment Transmittal (in triplicate)
Amendment

Virginia Szigeti

Virginia Szigeti
Reg. No. 29,039

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AMENDMENT TRANSMITTAL LETTER				ATTORNEY'S DOCKET NO.: 30-4496CONT		
SERIAL NUMBER: 09/981,611	FILING DATE: October 16, 2001	EXAMINER: E. Cole		GROUP ART UNIT: 1771		
INVENTION: FLEXIBLE FABRIC FROM FIBROUS WEB AND DISCONTINUOUS DOMAIN MATRIX						
INVENTOR(s): GARY A. HARPELL ET AL.						
TO THE ASSISTANT COMMISSIONER FOR PATENTS: Transmitted herewith is an amendment in the above-identified application. The fee has been calculated as shown below:						
CLAIMS AS AMENDED						
(1)	(2) CLAIMS REMAINING AFTER AMENDMENT	(3)	(4) HIGHEST NUMBER PREVIOUSLY PAID FOR	(5) NO. OF EXTRA CLAIMS PRESENT	(6) RATE	(7) ADDITIONAL FEE
TOTAL CLAIMS	3	MINUS	26		X \$18	0
INDEP. CLAIMS	1	MINUS	3	0	X \$84	0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$ 0
<p>* If the entry in column 2 is less than the entry in column 4, write "0" in column 5. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space. *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.</p> <p><input checked="" type="checkbox"/> No additional fee is required.</p> <p><input type="checkbox"/> Charge \$ _____ to Deposit Account No. <u>01-1125</u>. A triplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> The undersigned petitions for any extension of time for filing this document required under 37 C.F.R. 1.136 and requests that the \$ <u>930.00</u> fee be charged to Deposit Account No. <u>01-1125</u>. A triplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> Charge any additional fees to Deposit Account No. <u>01-1125</u></p>						
<u>May 9, 2003</u> Date			<u>Virginia Szigeti (Andrews)</u> Signature			
<u>804-520-3651</u> Phone			<u>Virginia Szigeti (Andrews)</u> Attorney Name			
			<u>29,039</u> Reg. Number			
I hereby certify that this correspondence is being sent via facsimile 703-872-9310 to Examiner E. Cole, on May 9, 2003.						
			<u>Virginia Szigeti (Andrews)</u> Signature			
			<u>Virginia Szigeti (Andrews)</u> Attorney of Record			
			<u>May 9, 2003</u> (Date)			